

Foster Family Home - Corrective Action Report

Provider ID: 1-562688

Home Name: Luzviminda Godoy, CNA

94-1030 Mahoe Place

Waipahu

HI 96797

Review ID: 1-562688-2

Reviewer: David Ayling

Begin Date: 1/13/2015

End Date:

2/11/15

Foster Family Home Required Certificate [17-1454-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

Home visit for a 3 person recertification review made on 1/13/15.

Corrective Action Report issued during home visit with all items due to CTA by 2/13/15.

6.(d)(1) - see applicable sections of the review

Foster Family Home Background Checks [17-1454-7.1]

7.1.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

Comment:

7.1.(a)(1) - HHM #1 needs 1st year fingerprints.

Foster Family Home Personnel and Staffing [17-1454-41]

41.(b)(7) Have a current tuberculosis clearance that meets department of health guidelines; and

41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

41.(c) The primary caregiver shall attend twelve hours, and the substitute caregiver shall attend eight hours, of in-service training annually which shall be approved by the department as pertinent to the management and care of clients. The primary caregiver shall maintain documentation of training received by all caregivers, in the caregiver file in the home.

Comment:

41.(b)(7) - CG #5 and HHM #1 need current TB clearance.

41.(b)(8) - CG #5 needs CPR and BBP certification.


41.(c) - CG #5 needs 12 hours of in-service training.


Foster Family Home Client Care and Services [17-1454-43]

43.(c)(3) Be based on the caregiver following a service plan for addressing the client's needs. The RN case manager may delegate client care and services as provided in chapter 16-89, subchapter 15, HAR;

Comment:

43.(c)(3) - CG #5 needs RN delegations and skills checks for client #1 and #2.


Compliance Manager


Primary Care Giver


Date


Date

February 09, 2015

TO Whom It May Concern:

Attn: David Ayling, RN, CTA Compliance
Manager

Rule # 7.1(A) Htm #1 needs 1 year finger prints
- send copy to CTA

Rule # 41.(B)(D)- CG #5 and Htm # need current TB clearance
- send current TB clearance copy CTA
41(b)(8) CG #5 CPR and BPP certification
- send copy to CTA

41(C)- CG #5 needs 12 hrs of Inservice Training
- send all copies David, CTA

43-(C) (3)- CG #5 needs RN delegation and
skills checks for client #1 and #2. Give
Nurse delegation this month.

I plan to update all requirements before
the due date, by putting it in my
- calendar and in my refrigerator so that it
is visible on my part and it always
reminds me the expiration date.

Hoping for your kind consideration.

Respectfully yours,
Luzviminda P. Godoy
P. Caregiver